

## PART B - FEE(S) TRANSMITTAL

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7590

09/13/2004

BILL NOONAN, M.D., J.D.  
KLARQUIST SPARKMAN LLP  
ONE WORLD TRADE CENTER, SUITE 1600  
121 S. SALMON STREET  
PORTLAND, OR 97204

12/17/2004 MWOLDGE2 00000075 09744289

01 FC:1501 1400.00 OP  
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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Susan Alpert Siegel, Ph.D.

(Depositor's name)

(Signature)

December 13, 2004

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/744,289	08/01/2001	Shousun Chen Szu	2026-4282US	3981

TITLE OF INVENTION: VACCINES AGAINST ESCHERICHIA COLI O157 INFECTION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	12/13/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
PORTNER, VIRGINIA ALLEN	1645	424-193100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☒ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Klarquist Sparkman, LLP

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## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

The Government of the United States of America, as represented by the Secretary, Department of Health and Human Services

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Rockville, MD

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☒ Government

## 4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee (No small entity discount permitted)☒ Advance Order - # of Copies ten

## 4b. Payment of Fee(s):

☒ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge any additional Deposit Account Number 02-4550 (enclose an extra copy of this form).

## 5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

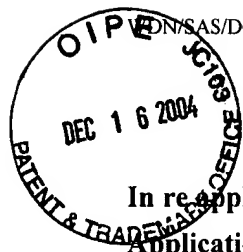
Typed or printed name Susan Alpert Siegel, Ph.D.

Date December 13, 2004

Registration No. 43,121

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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EDN/SAS/DC:dm 12/13/04 - 4239-66491-01 335728

PATENT  
Attorney Reference Number 4239-66491-01

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Szu et al.

Application No. 09/744,289

Filed: August 1, 2001

Confirmation No. 3981

For: VACCINES AGAINST ESCHERICHIA  
COLI O157 INFECTION

Examiner: Virginia Allen Portner

Art Unit: 1645

Attorney Reference No. 4239-66491-01

CERTIFICATE OF MAILING

I hereby certify that this paper and the documents referred to as being attached or enclosed herewith are being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: MAIL STOP ISSUE FEE, COMMISSIONER FOR PATENTS, P.O. BOX 1450, ALEXANDRIA, VA 22313-1450 on the date shown below.

Agent  
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Date Mailed December 13, 2004

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TRANSMITTAL LETTER

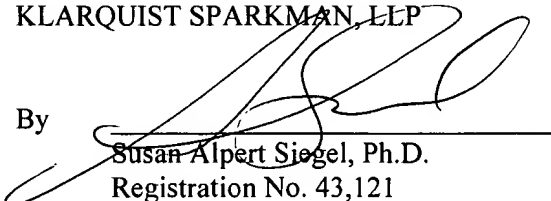
Enclosed for filing in the above-referenced application are the following:

- ☒ In connection with issuance of a patent:
  - ☒ Form PTOL-85b.
  - ☒ Advance order of 10 copies (Fee \$30.00).
  - ☒ Issue Fee (\$1,400.00).
  - ☒ A check in the amount of \$1,430 to cover the above-listed fees.
  - ☒ Fee Addressee Letter.
- ☒ The Director is hereby authorized to charge any additional fees that may be required in connection with issuance of a patent, or credit over-payment, to Account No. 02-4550. A copy of this sheet is enclosed.
- ☒ Please return the enclosed postcard to confirm that the items listed above have been received.

Respectfully submitted,

KLARQUIST SPARKMAN, LLP

By

  
Susan Alpert Siegel, Ph.D.  
Registration No. 43,121

One World Trade Center, Suite 1600  
121 S.W. Salmon Street  
Portland, Oregon 97204  
Telephone: (503) 226-7391  
Facsimile: (503) 228-9446

cc: Docketing